

**THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE**

IN RE:	§	
	§	CASE NO. 05-10845-MFW
Cedu School, Inc.	§	
	§	
DEBTOR.	§	
	§	

APPLICATION FOR THE RECOVERY OF UNCLAIMED FUNDS

COMES NOW the claimant, Dilks & Knopik, LLC, attorney-in-fact for Tracey Keenau, claimant, claimant, hereby petitions the Court for \$972.38, which is the sum of all monies being held in the registry of this court as unclaimed funds, which are due to Mary Vanos, creditor. A dividend check in the amount totaling \$972.38 was not negotiated by the creditor and the Trustee, pursuant to 11 U.S.C. Section 347(a), delivered the unclaimed funds to the Clerk, US Bankruptcy Court.

The creditor did not receive the dividend check in the above case for the following reason:

The original dividend check was sent to a Mary Vanos at PO Box 818, Big Bear Lake, CA 92315. That address is no longer valid. The current address is listed below. Mary Vanos is now known as Tracey Keenan, as evidenced by Exhibit A.

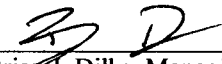
The creditor's current mailing address, phone and social security/tax identification number are:

Tracey Keenau
Tracey Keenau
9852 Oakwood Cir
Villa Park, CA 92861
Last four digits of SSN/TIN: xxx-xx-0467

Claimant now seeks to recover the funds from the Court's Registry. Wherefore, claimant prays that, upon proper notice to the U.S. Attorney's Office, the Court order that a check in the amount of \$972.38 made payable to Tracey Keenau c/o Dilks & Knopik, LLC be issued from the Court's Registry.

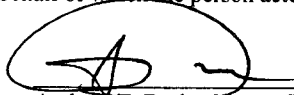
Dated: May 29, 2014

Respectfully Submitted:

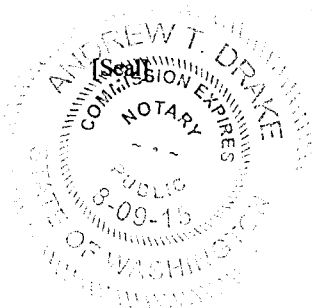


Brian J. Dilks, Managing Member
Dilks & Knopik, LLC, Attorney in Fact for
Tracey Keenau
35308 SE Center St
Snoqualmie, WA 98065
(425) 836-5728

On 5/29/2014 before me, Brian J. Dilks, personally appeared, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person (s) whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.



Andrew T. Drake, Notary Public
for the State of Washington, County of King
My Commission Expires: August 9, 2015



**THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE**

IN RE:	§	
	§	CASE NO. 05-10845-MFW
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	§	
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CERTIFICATE OF SERVICE

I, Brian J. Dilks, Managing Member of Dilks & Knopik, LLC, the undersigned, do declare that on May 29, 2014, I served the within Application for the Recovery of Unclaimed Funds to the US Attorney and US Trustee listed below.


I further declare that I served a true and correct copy of the within document via United States Mail, with postage thereon fully prepaid, to the following individual(s) as follows:

U.S. Attorney's Office
1201 Market Street, Ste 1100
PO Box 2046
Wilmington, DE 19899-2046

US Trustee's Office
844 King Street, Suite 2207
Wilmington, DE 19801

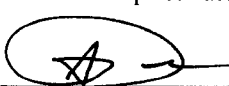
I declare, under penalty of perjury that the foregoing is true and correct to the best of my knowledge and belief.

Dated: May 29, 2014

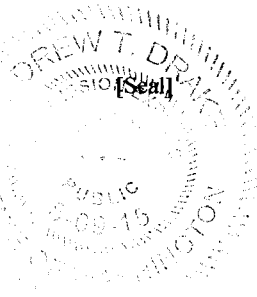
Respectfully Submitted: 

Brian J. Dilks, Managing Member
Dilks & Knopik, LLC, Attorney in Fact for
Tracey Keenau
35308 SE Center St
Snoqualmie, WA 98065
(425) 836-5728

On 5/29/2014 before me, Brian J. Dilks, personally appeared, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person (s) whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.



Andrew T. Drake, Notary Public
for the State of Washington, County of King
My Commission Expires: August 9, 2015



UNITED STATES BANKRUPTCY COURT
DISTRICT OF DELAWARE

RE: Cedu School, Inc.

Case: 05-10845-MFW

Debtor(s)

**AUTHORITY TO ACT
Limited Power of Attorney
LIMITED TO ONE TRANSACTION**

USED ONLY TO COLLECT FUNDS FROM THE ABOVE REFERENCED CASE

1. Mary Vanos ("CLIENT"), appoints Dilks & Knopik, LLC ("D&K"), as its lawful attorney in fact for the limited purpose of recovering, receiving and obtaining information pertaining to the outstanding tender of funds in the amount of \$972.38 (the "FUNDS"), including the right to collect on CLIENT's behalf any such funds that are held by a governmental agency or authority.
2. CLIENT grants to D&K the authority to do all things legally permissible and reasonably necessary to recover or obtain the FUNDS held by the governmental agency or authority. This limited authority includes the right to receive all communications from the governmental agency or authority and to deposit checks payable to CLIENT for distribution of the FUNDS to CLIENT, less the fee payable to D&K pursuant to and in accordance with its agreement with CLIENT.
3. D&K may not make any expenditure or incur any costs or fees on behalf of CLIENT without CLIENT's prior written consent.
4. This Authority to Act shall become effective on the below signed date and shall expire upon collection of the aforementioned FUNDS. I authorize the use of a photocopy of this Limited Power of Attorney in lieu of the original.

Tracey Keenan
Mary Vanos
Tax ID: XXX-XX-_____

5-8-, 2014
Date

ACKNOWLEDGMENT

STATE OF _____)

COUNTY OF _____

On this ____ day of _____, _____, before me, the undersigned Notary Public in and for the said County and State, personally appeared (name) Mary Vanos known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that (circle one) he/she did so freely and voluntarily and for the uses and purposes therein mentioned.

WITNESS my hand and official seal.

NOTARY PUBLIC _____

Residing at _____

My Commission expires _____

(pl. see attached A All
Purpose, Acknowledgment)

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

State of California

County of OrangeOn 5/8/2014 before me, Suketu R. Bhatt, Notary Public

Date

Here Insert Name and Title of the Officer

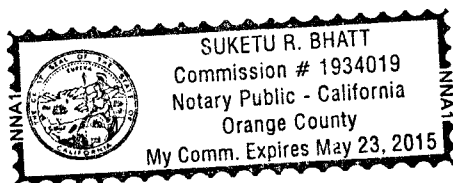
personally appeared Tracey Keenan

Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Place Notary Seal Above

Signature: [Signature]

Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached DocumentTitle or Type of Document: Auth to Act Ltd. P.O.A

Document Date: _____

Number of Pages: 1

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

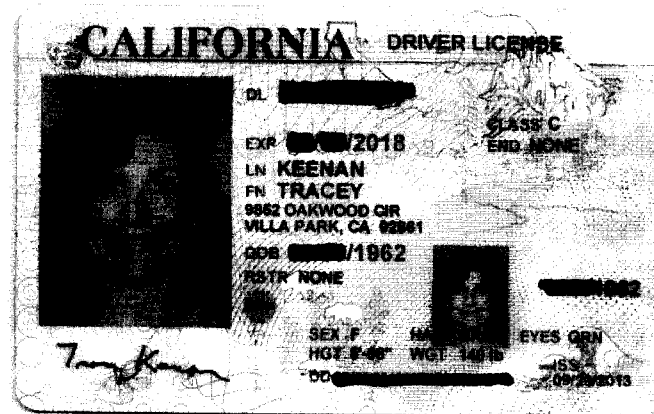
Signer's Name: _____

Signer's Name: _____

☐ Corporate Officer — Title(s): _____☐ Corporate Officer — Title(s): _____☒ Individual☐ Individual☐ Partner — ☐ Limited ☐ General☐ Partner — ☐ Limited ☐ General☐ Attorney in Fact☐ Attorney in Fact☐ Trustee☐ Trustee☐ Guardian or Conservator☐ Guardian or Conservator☐ Other: _____☐ Other: _____

Signer Is Representing: _____

Signer Is Representing: _____



NC-130

PETITIONER OR ATTORNEY (Name, State Bar number, and address): Mary Therese Vanos 9852 Oakwood Circle Villa Park, California 92861 TELEPHONE NO. (323) 370-3376 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Self-Represented		FOR COURT USE ONLY FILED SUPERIOR COURT OF CALIFORNIA COUNTY OF ORANGE CENTRAL JUSTICE CENTER JUL 18 2013 30-2013-00649912- PR-OP-LJC
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS 341 The City Drive MAILING ADDRESS: SAME CITY AND ZIP CODE: Orange 92868 BRANCH NAME: Lamoreaux Justice Center		
PETITION OF (Name of each petitioner): Mary Therese Vanos		
FOR CHANGE OF NAME DECREE CHANGING NAME		

1. The petition was duly considered:

- a. ☒ at the hearing on (date): _____ in Courtroom: _____ of the above-entitled court.
- b. ☒ without hearing.

THE COURT FINDS

2. a. All notices required by law have been given.

b. Each person whose name is to be changed identified in item 3 below

- (1) ☒ is not ☐ is under the jurisdiction of the Department of Corrections, and
- (2) ☒ is not ☐ is required to register as a sex offender under section 290 of the Penal Code.

These determinations were made ☐ by using CLETS/CJIS ☐ based on information provided to the clerk of the court by a local law enforcement agency.

- c. ☒ No objections to the proposed change of name were made.
- d. ☐ Objections to the proposed change of name were made by (name): _____

e. it appears to the satisfaction of the court that all the allegations in the petition are true and sufficient and that the petition should be granted.

f. ☐ Other findings (if any): _____

THE COURT ORDERS

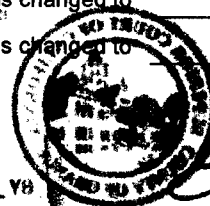
3. The name of

- | | Present name | | New name |
|----|--------------------|---------------|---------------|
| a. | Mary Therese Vanos | is changed to | Tracey Keenan |
| b. | | is changed to | |
| c. | | is changed to | |
| d. | | is changed to | |
| e. | | is changed to | |

☐ Additional names changed are listed on Attachment 3

YU430

JUL 18 2013



Charles Margines

Date:

JUDGE OF THE SUPERIOR COURT
☐ SIGNATURE OF JUDGE FOLLOWS LAST ATTACHMENT

Department of the Treasury — Internal Revenue Service Form 1040 U.S. Individual Income Tax Return 2004		(99) IRS Use Only — Do not write or staple in this space.																																																																
Label (See instructions.) Use the IRS label. Otherwise, please print or type. Presidential Election Campaign (See instructions.)	For the year Jan 1 - Dec 31, 2004, or other tax year beginning , 2004, ending , 20		OMB No. 1545-0074																																																															
	Your first name MI Last name STEPHEN M VANOS		Your social security number [REDACTED]																																																															
	If a joint return, spouse's first name MI Last name MARY THERESE VANOS		Spouse's social security number [REDACTED] - 0467																																																															
	Home address (number and street). If you have a P.O. box, see instructions. Apartment no. P.O. BOX 818		▲ Important! ▲ You must enter your social security number(s) above.																																																															
	City, town or post office. If you have a foreign address, see instructions. State ZIP code BIG BEAR LAKE CA 92315																																																																	
Note: Checking 'Yes' will not change your tax or reduce your refund. Do you, or your spouse if filing a joint return, want \$3 to go to this fund? <table style="float: right; margin-top: -20px;"> <tr> <td style="text-align: center;">You</td> <td style="text-align: center;">Spouse</td> </tr> <tr> <td style="text-align: center;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </td> <td style="text-align: center;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </td> </tr> </table>				You	Spouse	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																											
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<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																																	
Filing Status Check only one box.	<table style="width:100%;"> <tr> <td style="width: 50%; vertical-align: top;"> 1 <input type="checkbox"/> Single 2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income) 3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above & full name here </td> <td style="width: 50%; vertical-align: top;"> 4 <input type="checkbox"/> Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here 5 <input type="checkbox"/> Qualifying widow(er) with dependent child (see instructions) </td> </tr> </table>			1 <input type="checkbox"/> Single 2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income) 3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above & full name here	4 <input type="checkbox"/> Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here 5 <input type="checkbox"/> Qualifying widow(er) with dependent child (see instructions)																																																													
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Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a W-2, see instructions. Enclose, but do not attach, any payment. Also, please use Form 1040-V.	<table style="width:100%;"> <tr> <td style="width: 70%;">7 Wages, salaries, tips, etc. Attach Form(s) W-2</td> <td style="width: 5%;">7</td> <td style="width: 25%;">[REDACTED]</td> </tr> <tr> <td>8a Taxable interest. Attach Schedule B if required</td> <td>8a</td> <td></td> </tr> <tr> <td>b Tax-exempt interest. Do not include on line 8a</td> <td>8b</td> <td></td> </tr> <tr> <td>9a Ordinary dividends. Attach Schedule B if required</td> <td>9a</td> <td></td> </tr> <tr> <td>b Qualified divs (see instrs)</td> <td>9b</td> <td></td> </tr> <tr> <td>10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)</td> <td>10</td> <td>[REDACTED]</td> </tr> <tr> <td>11 Alimony received</td> <td>11</td> <td></td> </tr> <tr> <td>12 Business income or (loss). Attach Schedule C or C-EZ</td> <td>12</td> <td></td> </tr> <tr> <td>13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here</td> <td>13</td> <td>[REDACTED]</td> </tr> <tr> <td>14 Other gains or (losses). Attach Form 4797</td> <td>14</td> <td></td> </tr> <tr> <td>15a IRA distributions</td> <td>15a</td> <td></td> </tr> <tr> <td>b Taxable amount (see instrs)</td> <td>15b</td> <td></td> </tr> <tr> <td>16a Pensions and annuities</td> <td>16a</td> <td></td> </tr> <tr> <td>b Taxable amount (see instrs)</td> <td>16b</td> <td></td> </tr> <tr> <td>17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E</td> <td>17</td> <td></td> </tr> <tr> <td>18 Farm income or (loss). Attach Schedule F</td> <td>18</td> <td></td> </tr> <tr> <td>19 Unemployment compensation</td> <td>19</td> <td>[REDACTED]</td> </tr> <tr> <td>20a Social security benefits</td> <td>20a</td> <td></td> </tr> <tr> <td>b Taxable amount (see instrs)</td> <td>20b</td> <td></td> </tr> <tr> <td>21 Other income</td> <td>21</td> <td></td> </tr> <tr> <td>22 Add the amounts in the far right column for lines 7 through 21. This is your total income</td> <td>22</td> <td>[REDACTED]</td> </tr> </table>			7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	[REDACTED]	8a Taxable interest. Attach Schedule B if required	8a		b Tax-exempt interest. Do not include on line 8a	8b		9a Ordinary dividends. Attach Schedule B if required	9a		b Qualified divs (see instrs)	9b		10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)	10	[REDACTED]	11 Alimony received	11		12 Business income or (loss). Attach Schedule C or C-EZ	12		13 Capital gain or (loss). Att Sch D if reqd. If not reqd, ck here	13	[REDACTED]	14 Other gains or (losses). Attach Form 4797	14		15a IRA distributions	15a		b Taxable amount (see instrs)	15b		16a Pensions and annuities	16a		b Taxable amount (see instrs)	16b		17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17		18 Farm income or (loss). Attach Schedule F	18		19 Unemployment compensation	19	[REDACTED]	20a Social security benefits	20a		b Taxable amount (see instrs)	20b		21 Other income	21		22 Add the amounts in the far right column for lines 7 through 21. This is your total income	22	[REDACTED]
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29 Moving expenses. Attach Form 3903	29																																																																	
30 One-half of self-employment tax. Attach Schedule SE	30																																																																	
31 Self-employed health insurance deduction (see instrs)	31																																																																	
32 Self-employed SEP, SIMPLE, and qualified plans	32																																																																	
33 Penalty on early withdrawal of savings	33																																																																	
34a Alimony paid b Recipient's SSN	34a																																																																	
35 Add lines 23 through 34a	35																																																																	
36 Subtract line 35 from line 22. This is your adjusted gross income	36	[REDACTED]																																																																

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE**

IN RE:	§	
	§	CASE NO. 05-10845-MFW
Cedu School, Inc.	§	
	§	
DEBTOR.	§	
	§	

ORDER TO PAY UNCLAIMED FUNDS

It appearing that the check made payable to Mary Vanos, in the amount of \$972.38 was not charged against the bank account of the debtor's estate within the 90-day limit pursuant to 11 U.S.C. §347 and an unclaimed money report was entered to close the account and transfer the monies into the registry of the Clerk, United States Bankruptcy Court, and

It further appearing that Tracey Keenau C/o Dilks & Knopik, LLC now claims the above monies in the petition attached hereto,

IT IS ORDERED that the Clerk of the Bankruptcy Court pay the sum of \$972.38, to:

Tracey Keenau
C/o Dilks & Knopik, LLC
35308 SE Center St
Snoqualmie, WA 98065.

Dated: _____

United States Bankruptcy Judge